MI LWAUKEE CO MHC REHAB-HILLTOP 9455 WATERTOWN PLANK ROAD

Number of Residents on 12/31/00:

MI LWAUKEE 53226 Phone: (414) 257-7339 Ownership: County Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: **FDDs** Operate in Conjunction with Hospital? Yes Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/00): 113 Title 18 (Medicare) Certified? No Total Licensed Bed Capacity (12/31/00): 113 Average Daily Census: 108

107

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	osis of	Residents (12/31	/00)	Length of Stay (12/31/00)	%	
Home Health Care	No	Primary Diagnosis	 %	Age Groups	%	Less Than 1 Year	7. 5	
Supp. Home Care-Personal Care	No					1 - 4 Years	17. 8	
Supp. Home Care-Household Services	No	Developmental Disabilities	92. 5	Under 65 93. 5		More Than 4 Years	74. 8	
Day Services	No Mental Illness (Org./Psy)		2.8	65 - 74 5				
Respite Care			4. 7	75 - 84	0. 9		100. 0	
Adult Day Care No Alcohol & Other Drug Abuse		0.0	85 - 94	0. 0	**********	******		
Adult Day Health Care No		Para-, Quadra-, Hemiplegic	0.0 95 & 0ver		0.0	Full-Time Equivalent		
Congregate Meals No		Cancer	0.0			Nursing Staff per 100 Residents		
Home Delivered Meals	ome Delivered Meals No Fractures		0.0		100.0	(12/31/00)		
Other Meals	No	Cardi ovascul ar	0.0	65 & 0ver	6. 5	 		
Transportation	No	Cerebrovascul ar	0.0			RNs	9. 1	
Referral Service	No	Di abetes	0.0	Sex	%	LPNs	14. 0	
Other Services	No	Respiratory	0.0			Nursing Assistants		
Provide Day Programming for		Other Medical Conditions	0.0	Male	74. 8	Aides & Orderlies	58. 0	
Mentally Ill	Yes			Female	25. 2			
Provide Day Programming for			100.0					
Developmentally Disabled	Yes				100. 0			
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Method of Reimbursement

		Medi ca	are		Medi c	ai d											
		(Title	18)		(Title	19)		0th	er	Pri	i vate 🛚	Pay	1	Manage	d Care		Percent
			Per Di	em		Per Die	m		Per Die	m]	Per Dien	n]	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Intermediate				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Limited Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Residential Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Dev. Di sabl ed				107	100. 0	\$166.91	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	107	100.0%
Traumatic Brain In	j. 0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Ventilator-Depende	nt 0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Total	0	0. 0		107	100. 0		0	0. 0		0	0. 0		0	0.0		107	100.0%

MI LWAUKEE CO MHC REHAB-HILLTOP

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condi t	i ons, Servi ces	s, and Activities as of	12/31/00
Deaths During Reporting Period							
		1			% Needi ng		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents
Private Home/With Home Health	0.0	Bathi ng	47.7		41. 1	11. 2	107
Other Nursing Homes	0.0	Dressi ng	57. 0		31.8	11. 2	107
Acute Care Hospitals	25 . 0	Transferring	81. 3		7. 5	11. 2	107
Psych. HospMR/DD Facilities	75. 0	Toilet Use	78. 5		10. 3	11. 2	107
Rehabilitation Hospitals	0.0	Eati ng	47. 7		39. 3	13. 1	107
Other Locations	0.0	*************	******	*****	*******	********	******
Total Number of Admissions	8	Continence		%	Special Trea	ntments	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	2.8	Recei vi ng	Respiratory Care	1. 9
Private Home/No Home Health	0.0	0cc/Freq. Incontiner	nt of Bladder	11. 2	Recei vi ng	Tracheostomy Care	0. 0
Private Home/With Home Health	14. 3	0cc/Freq. Incontiner	nt of Bowel	8. 4	Recei vi ng	Sucti oni ng	0. 9
Other Nursing Homes	14. 3				Recei vi ng	Ostomy Care	0. 0
Acute Care Hospitals	7. 1	Mobility			Recei vi ng	Tube Feeding	3. 7
Psych. HospMR/DD Facilities	14. 3	Physically Restraine	ed	0.9	Recei vi ng	Mechanically Altered I	iets 22.4
Rehabilitation Hospitals	0.0						
Other Locations	42. 9	Skin Care			Other Reside	ent Characteristics	
Deaths	7. 1	With Pressure Sores		0.9	Have Advar	nce Directives	0. 0
Total Number of Discharges		With Rashes		1.9	Medi cati ons		
(Including Deaths)	14				Recei vi ng	Psychoactive Drugs	99. 1
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	Thi s		FDD	Al 1		
	Facility	Fa	cilities	Fac	ilties	
	%	%	Rati o	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	95. 6	85. 5	1. 12	84. 5	1. 13	
Current Residents from In-County	100. 0	42. 1	2. 37	77. 5	1. 29	
Admissions from In-County, Still Residing	100. 0	19. 5	5. 13	21. 5	4. 65	
Admissions/Average Daily Census	7. 4	16. 4	0. 45	124. 3	0.06	
Discharges/Average Daily Census	13. 0	19. 2	0. 67	126. 1	0. 10	
Discharges To Private Residence/Average Daily Census	1. 9	9. 2	0. 20	49. 9	0. 04	
Residents Receiving Skilled Care	0. 0	0. 0	0.00	83. 3	0.00	
Residents Aged 65 and Older	6. 5	16. 2	0. 40	87. 7	0. 07	
Title 19 (Medicaid) Funded Residents	100. 0	99. 5	1.01	69. 0	1. 45	
Private Pay Funded Residents	0. 0	0. 5	0.00	22. 6	0.00	
Developmentally Disabled Residents	92. 5	99. 3	0. 93	7. 6	12. 11	
Mentally Ill Residents	7. 5	0. 5	14. 80	33. 3	0. 22	
General Medical Service Residents	0.0	0. 2	0.00	18. 4	0.00	
Impaired ADL (Mean)*	24. 7	50. 8	0. 49	49. 4	0. 50	
Psychological Problems	99. 1	45. 9	2. 16	50. 1	1. 98	
Nursing Care Required (Mean)*	4. 0	11. 0	0. 36	7. 2	0. 56	